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_	Substitute for Form PTO-875									Application of Docket Number		
APPLICATION AS FILED - PART I (Column 1) (Column 2)					S	SMALL ENTITY			OTHER THAN SMALL ENTITY			
	FOR	NUN	UMBER FILED NUMBER EXTRA		RAT	RATE (\$) FE		7	DATE (6)	FFF (0)		
	SIC FEE CFR 1.16(a), (b), or	(c))						FEE (\$)	7	RATE (\$)	BO SEE (S)	
	ARCH FEE CFR 1.16(k), (i), or (i	m))				1	·		1			
EX	AMINATION FEE CFR 1.16(0), (p), or					1			1		200	
(37	TAL CLAIMS CFR 1.16(i))	20	minus	20 = *	···	X	. =		OR	X =	1.000	
	DEPENDENT CLA CFR 1.16(h))	IMS	minus	3 = •		×	=					
(37	CFR 1.16(s))	sheets is \$250 addition 35 U.S.	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				·			X		
MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
*	* If the difference in column 1 is less than zero, enter "0" in column 2.						AL		-	TOTAL		
					j	TOTAL						
	7072	io/thon Ao	VIAITIAT	DED – PART I	1		•				<u>.</u>	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					SM	SMALL ENTITY				R THAN ENTITY	
AMENDMENT A	Total	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
	(37 CFR 1.16(i))	· · · · · · · · · · · · · · · · · · ·	Minus	**	=	x	=		OR	X =		
	Independent (37 CFR 1.16(h))	•	Minus	***	= .	×	=	•				
	Application Size Fee (37 CFR 1:16(s))								OR	X =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
	· · · · · · · · · · · · · · · · · · ·						EE		OR	TOTAL ADD'L FEE	<u> </u>	
		(Column 1)		(Column 2)	(Column 3)							
DMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL	
ME	Total (37 CFR 1.16())	•	Minus	40	2	X	=		25	v	FEE (\$)	
AMEND	Independent (37 CFR 1.16(h))	•	Minus	***	=				OR	X =		
	Application Size Fee (37 CFR 1.16(s))				×			OR	X =			
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										·	
							EE		OR OR	TOTAL ADD'L FEE		
•	if the "Highest Nu	ımber Previously mber Previously	Paid For Paid For	in column 2, write IN THIS SPACE IN IN THIS SPACE IN Total or Independent	is less than 20, o	enter "20".						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.